

that protect human and animal health and the environment while reducing, refining, or replacing animal tests and ensuring human safety and product effectiveness; to the Committee on Health, Education, Labor, and Pensions.

By Mr. HOLLINGS (by request):

S. 1496. A bill to authorize activities under the Federal railroad safety laws for fiscal years 2000 through 2003, and for other purposes; to the Committee on Commerce, Science, and Transportation.

By Mrs. BOXER (for herself, Mr. SMITH of Oregon, and Mr. LAUTENBERG):

S. 1497. A bill to amend the Foreign Assistance Act of 1961 to take steps to control the growing international problem of tuberculosis; to the Committee on Foreign Relations.

By Mr. BURNS:

S. 1498. A bill to amend chapter 55 of title 5, United States Code, to authorize equal overtime pay provisions for all Federal employees engaged in wildland fire suppression operations; to the Committee on Governmental Affairs.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. BROWNBAC (for himself, Mr. MOYNIHAN, Mr. LOTT, Mr. DORGAN, Mr. ALLARD, Mr. CONRAD, Mr. ABRAHAM, Mr. COVERDELL, Mr. SESSIONS, and Mr. CRAIG):

S. Res. 172. A resolution to establish a special committee of the Senate to address the cultural crisis facing America; to the Committee on Rules and Administration.

By Mr. LOTT (for himself and Mr. DASCHLE):

S. Res. 173. To authorize representation of the Senate Committee on Armed Services in the case of Philip Tinsley III v. Senate Committee on Armed Services; considered and agreed to.

S. Res. 174. To authorize representation of the Senate Committee on the Judiciary in the case of Philip Tinsley III v. Senate Committee on the Judiciary; considered and agreed to.

By Mr. BROWNBAC (for himself, Mr. LIEBERMAN, Mr. LOTT, Mr. HELMS, Mr. GRAHAM, Mr. MACK, Mr. WELLSTONE, and Mr. WYDEN):

S. Con. Res. 50. A concurrent resolution expressing the sense of Congress concerning the continuous repression of freedom of expression and assembly, and of individual human rights, in Iran, as exemplified by the recent repression of the democratic movement of Iran; to the Committee on Foreign Relations.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Ms. SNOWE (for herself and Mr. WYDEN):

S. 1480. A bill to amend title XVIII of the Social Security Act of assure access of Medicare beneficiaries to prescription drug coverage through the SPICE drug benefit program; to the Committee on Finance.

SENIORS PRESCRIPTION INSURANCE COVERAGE
EQUITY (SPICE) ACT OF 1999

• Ms. SNOWE. Mr. President, today I am introducing the Seniors Prescrip-

tion Insurance Coverage Equity (SPICE) Act along with my colleague from Oregon, Senator WYDEN. The purpose of this bill is to provide Medicare beneficiaries with access to prescription drug coverage. The program is voluntary and federal assistance will be provided to help pay for the premiums. Senator WYDEN and I believe that this bill is one solution to the lack of prescription drug coverage for America's seniors and we believe that it is a bill we could and should enact this year.

Lack of prescription drug coverage is a serious problem facing our seniors. When Medicare was created in 1965 it was based on the inpatient care system that was prevalent at that time. Today, thirty four years later, drug therapy often allows individuals to stay out of the hospital—but Medicare does not cover drugs. And the lack of coverage means that those over 65 years of age end up paying for half the costs associated with their prescriptions, while the average person under age 65 pays only a third. It also means that seniors are forgoing medication because they cannot afford it.

The SPICE Act creates a voluntary supplemental drug insurance policy that all Medicare eligible individuals can purchase. These policies will be guaranteed issue—no one can be turned down. SPICE eligibility will begin when Medicare eligibility begins. There will be a penalty for late entry, just as there is for those who make a late entry into the Medicare Part B program. The penalty fee for late entry will be waived if the late entry is based on the loss of prior drug coverage from a Medicare + Choice plan or a retiree group health plan.

All seniors will receive some premium support assistance on a sliding scale based on income. Every senior will receive at least 25% premium support. Those below 150% of the federal poverty line will receive 100% premium support. A sliding scale will phase down the premium support from 100% to 25% for those between 150% and 175% of the federal poverty line.

The federal premium support will be used to allow seniors to purchase SPICE policies from private providers, similar to the Medigap program. The policies will all meet a threshold standard developed by the SPICE Board, which includes consumers, state insurance commissioners, and insurance representatives, and will be designed with seniors needs in mind. Medicare+Choice and group health plans which provide drug coverage for Medicare eligible individuals will be able to receive the actuarial value of the drug benefit if their plans meet or exceed the SPICE Board threshold benefit plan.

Seniors will be given a choice of plans. This will ensure competition and help keep the costs down and will allow seniors to choose the plan that best

meets their needs. To provide an idea of the types of choices, plans may offer coverage for different drugs (formularies), copays, deductibles, and caps. The SPICE Board will disseminate information about these choices, much like the Federal Employee Benefit Health Program (FEHBP) does.

Funding sources for the benefit will come from the on-budget surplus, which the Congressional Budget Office (CBO) estimates show to be \$505 billion after the \$792 billion tax cut legislation that is currently in conference. Additional funding may come from implementing the President's FY2000 budget proposal to raise the tobacco tax by 55 cents per pack in addition to enacting the 15 cent tobacco increase already in law one year earlier than originally planned.

America's seniors need help in obtaining prescription drug coverage. SPICE is a doable proposal that can be passed whether or not we are able to move forward on Medicare reform this year.●

• Mr. WYDEN. Mr. President, today Senator SNOWE and I are introducing legislation to provide seniors with insurance coverage for prescription drugs. This legislation, the Seniors Prescription Insurance Coverage Equity Act, SPICE, is the only bipartisan, market-based approach to provide seniors with choice and access to coverage that is actually paid for. It will give seniors the same kind of coverage that their member of Congress has.

The key issue for seniors around our nation, when it comes to the issue of prescription drugs, is affordability. Our proposal will assure that each and every senior who voluntarily chooses to enroll in a SPICE plan will have the bargaining power of HMOs and of the large insurers whose job it is to get the best price they can. At least 13 million seniors have no prescription drug coverage at all. Those seniors get penalized twice: they have to pay all their costs, and they pay more because they can't get the negotiated rate that the insurers and HMOs can. This bill will level the playing field for those seniors giving them affordability and access.

We know the kinds of drugs that are coming on the market now can help save lives, better the health status of an older person and, in many instances, save dollars because seniors taking their prescription drugs as they are told to by their doctor will prevent costly hospitalizations and the progression of disease. If we were to create Medicare today from scratch, there would be no questions about including prescription drug coverage. If we want to assure that Medicare beneficiaries stay healthy longer we must provide prescription drug coverage. If we want to be thoughtful, prudent purchasers of health care, we must find a way to assure seniors access to the drugs.